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Eugene Chovanes
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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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PIPE TRANSMITTAL FORM (to be used for correspondence after initial filing) DEC 21 2005 PTO/USPTO	Application Number	10/659,244
	Filing Date	September 10, 2003
	First Named Inventor	Clancy D. McKenzie
	Art Unit	3677
	Examiner Name	Jack W. Lavinder
	Attorney Docket Number	0310
Total Number of Pages in This Submission		2

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Jackson and Chovanes		
Signature	<i>Eugene Chovanes</i>		
Printed name	Eugene Chovanes		
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PTO/SB/82 (04-05)

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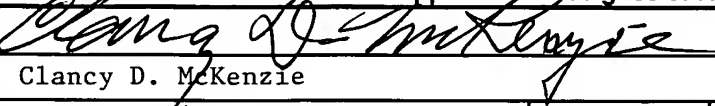
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Application Number	10/659,244
Filing Date	September 10, 2003
First Named Inventor	Clancy D. McKenzie
Art Unit	3677
Examiner Name	Jack W. Lavinder
Attorney Docket Number	0310

I hereby revoke all previous powers of attorney given in the above-identified application.☐ ~~A Power of Attorney is submitted herewith.~~**OR**☐ ~~I hereby appoint the practitioners associated with the Customer Number~~ ☐ ~~Please change the correspondence address for the above-identified application to:~~☐ ~~The address associated with~~
~~Customer Number:~~ **OR**☐ ~~Firm or~~
~~Individual Name~~~~Address~~~~City~~~~State~~~~Zip~~~~Country~~~~Telephone~~~~Email~~**I am the:**☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature			
Name	Clancy D. McKenzie		
Date	12-16-05	Telephone	610-664-0948

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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